**Greentree Community Church**

**Student Ministries**

**International Mission Trip Application**

**Honduras July 20-26, 2019**

**(rising 9th – high school graduates)**

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**Greentree Community Church**

**International Mission Trip Application**

**PERSONAL INFORMATION**

**Full Legal Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name (you prefer to be called) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender: Male Female

Do you have a current Passport: Yes No

If YES, refer to passport for the following:

Passport Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Issuing Authority \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Issue \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Expiration \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Does the name on your passport match **EXACTLY** your full legal name above? Yes No

If NO, record name **EXACTLY** as shown on passport \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever traveled internationally? Where, when, and why?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INDIVIDUAL TO CONTACT IN AN EMERGENCY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email for distribution list\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Phone (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_ Other Phone (\_\_\_\_\_\_) \_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_

**PHYSICAL INFORMATION**

List all medical conditions, disabilities, and/or special needs that would be helpful for your team leaders to be aware of:

List all allergies (food, drug and other). What is your reaction/severity of these allergies?

List all prescription or over-the-counter medications you are presently taking (including any generic names) and include the strength/dosage of each:

Circle any activity or condition you are unable to tolerate:

Rigorous outdoor activity Extreme Temperatures (high or low) Long periods of standing

High Altitudes Poor air quality Long periods of sitting

Restricted diet Flying Long periods of walking

Please explain any you marked:

**SPIRITUAL INFORMATION**

Please share in 2-3 paragraphs your journey to faith. Describe your relationship with Jesus. (use a separate page for this answer)

How long have you been involved in Greentree Student Ministries? **\_\_\_\_\_\_\_\_\_\_\_\_\_**

Have you ever participated in a mission trip? Yes No

If yes, where?

Are you willing to call or write family/friends to pray for you and the team? Yes No

**PERSONAL INFORMATION**

Which do you consider yourself? Introvert Extrovert Leader Follower

List 3 of your strengths:

List 3 of your weaknesses:

Have you ever been involved in any criminal activity?: Yes No (if yes, please explain)

Are there any struggles, family situations, unhealthy behaviors you have been dealing with in the last 12 months?

Why are you considering/feeling called to participate in this short-term mission project?

What concerns/fears do you have about this specific mission project?

***To the best of my knowledge, the information supplied in this application is accurate and truthful.***

***I understand that as part of this application I am required to turn in a non-refundable deposit made payable to Greentree Community Church. I will abide by the rules, schedules, and expectations established by our GTCC Student Ministry staff & team leaders. I also give Greentree Community Church and the leadership of this team permission to have me treated in the case of any medical emergency. I will not hold Greentree Community Church liable for treatment rendered.***

***I agree to honor financial deadlines associated with this mission trip including my balance paid in full two weeks prior to departure. I understand that there are no refunds issued should I opt out of this trip at any point prior to departure.***

***If you are under 18 years of age at the time of this application, signature of your parent or legal guardian is required. Parent/Legal Guardian’s signature below indicates approval for the minor child to participate in this Short-Term Missions Project of Greentree Community Church.***

Student signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student print name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian (if student is under 18)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

Parent/Guardian print name(if student is under 18)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_